TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

Control Department or Agency <u>Secretary of State</u>	
Rule No. 820-2-913	
Rule Title: Application for Issuance of Free Alabama Dertification to Obtain Free Alabama Photo Voter ID Ca	
X	opt by Reference
Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety?	Yes
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?	Yes
Is there another, less restrictive method of regulation available that could adequately protect the public?	No
Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?	No
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?	No
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	Yes
************	*****
Does the proposed rule have an economic impact?	No
If the proposed rule has an economic impact, the proposed required to be accompanied by a fiscal note prepared in subsection (f) of Section 41-22-23, Code of Alabama 1975	accordance with
**************************************	*****
I certify that the attached proposed rule has been proposed compliance with the requirements of Chapter 22, Title 41, 1975, and that it conforms to all applicable filing required and instractive Procedure Division of the Legislative Reference	, <u>Code of Alabama</u> irements of the
Signature of certifying officer J. Benut	
Date 8/6/14	RECD & File

Office of the Secretary of State Administrative Division

NOTICE OF INTENDED ACTION

AGENCY NAME: Secretary of State.

RULE NO. & TITLE: 820-2-9-.13 Application for Issuance of

Free Alabama Birth or Marriage Certification to Obtain Free Alabama

Photo Voter ID Card

INTENDED ACTION: New Rule.

SUBSTANCE OF PROPOSED ACTION: This proposed rule will provide a procedure to ensure electors are able to obtain valid photo identification pursuant to the requirements of the Code of Alabama, 1975, section 17-9-30.

TIME, PLACE, MANNER OF PRESENTING VIEWS:

Views may be presented orally or in writing and should be addressed to Jean Brown, Chief Legal Advisor, Office of the Secretary of State, P.O. Box 5616, Montgomery, Alabama 36103; 334-242-7202.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

October 3, 2014.

CONTACT PERSON AT AGENCY:

Jean Brown, Office of the Secretary of State, State Capitol, 600 Dexter Avenue, Suite S-205, Montgomery, Alabama 36104; 334-242-7202.

Dignature of officer authorized to promulgate and adopt rules or his or her deputy)

APA-2 07/04

NEW

OFFICE OF THE SECRETARY OF STATE ADMINISTRATIVE CODE

820-2-9-.13

Application for Issuance of Free
Alabama Birth or Marriage Certification
to Obtain Free Alabama Photo Voter ID
Card

- a. The following application is to be used by Alabama voters who need a free birth or marriage certificate to obtain a free Alabama Photo Voter Identification Card.
- b. The birth or marriage certificate will be provided electronically to the processing or issuing agent and is for voting purposes only. The voter will not be given a copy of these free birth or marriage certificates. The processing or issuing agent is to transmit both sides of the application to the state office of the Alabama Department of Public Heath using the contact information provided by the Secretary of State.
- c. The processing or issuing agent transmitting the application for free Alabama birth or marriage certificate must include a transmittal form identifying the office that is transmitting the form to the Alabama Department of Public Health.

SIDE A

OFFICE OF THE SECRETARY OF STATE APPLICATION FOR ISSUANCE OF FREE ALABAMA BIRTH OR MARRIAGE CERTIFICATION TO OBTAIN FREE ALABAMA PHOTO VOTER ID CARD

Print Your Name:			
Address:			
City:		State:	
Zip:	Daytime	Phone: ()	

DO NOT COMPLETE THIS FORM IF YOU HAVE ANY OF THE FOLLOWING:

- 1. a valid Alabama driver's license or a valid Alabama nondriver identification card which was properly issued by the appropriate state or county department or agency;
- 2. a valid Alabama photo voter identification card;
- 3. a valid identification card issued by a branch, department, agency, or entity of the State of Alabama, any other state, or the United States authorized by law to issue personal identification, provided that such identification card contains a photograph of the elector;
- 4. a valid U.S. passport;
- 5. a valid employee identification card containing the photograph of the elector and issued by any branch, department, agency, or entity of the U.S. government, the State of Alabama, or any county, municipality, board, authority, or other entity of this state;
- 6. a valid student or employee identification card issued by a public or private college, university, or postgraduate technical or professional school located within the State of Alabama, provided that such identification card contains a photograph of the elector;
- 7. a valid U.S. military identification card, provided that such identification card contains a photograph of the elector; or
- 8. a valid tribal identification card containing a photograph of the elector.

Signature	of	Alabama	registered	voter
Date				

SIDE B

APPLICATION FOR ISSUANCE OF A FREE ALABAMA BIRTH OR MARRIAGE CERTIFICATION TO OBTAIN FREE ALABAMA PHOTO VOTER ID CARD

SIDE A MUST BE COMPLETED BEFORE COMPLETING SIDE B OF THIS FORM USE ONLY FOR A VITAL EVENT WHICH OCCURRED IN ALABAMA

THERE IS NO FEE FOR BIRTH OR MARRIAGE RECORD SEARCHES FOR PURPOSES OF ELECTOR VOTING.

request cannot be processed.						
TAKE THIS FOR	RM TO YOUR LOC	CAL BOARD OF R	REGISTRARS OFFICE			
APPLICANT SECTION (THIS SECTION MUST BE COMPLETED) Anyone falsely applying for a record is subject to a penalty upon conviction of up to three months in the county jail or a fine of up to \$500. Code of Ala. 1975, § 13A-10-109. By signing, you are certifying you have a legal right to the record requested.						
Your Signature			Date			
Print Your Name	Address					
City	State	Zip	Daytime Phone			
BIRTH:						
FULL NAME AS ON BIRTH CERTIFICATE	FIRST	MIDDL	E LAST			
DATE OF BIRTH		SEX				
COUNTY OF BIRTH						
FULL MAIDEN NAME OF MOTHER	FIRST	MIDDL	F LAST			
FULL NAME OF FATHER	, , , ,					
	FIRST	MIDDL	E LAST			
MARRIAGE:						
FULL NAME OF HUSBAND	FIRST	MIDDL	E LAST			
FULL MAIDEN NAME OF WIFE	FIRST	MIDDL	F LAST			
DATE OF MARRIAGE						
DATE OF MARRIAGE	_ COUNTY WHERE	LICENSE WAS 133	OED			
FOR OFFICE USE ONLY:						
PROCESSING/ISSUING AGENT USE: The processing/issuing agent must print and sign his or her name below before transmitting both sides of the application to the state office of the Alabama Department of Public Health						
Processing/Issuing Agent Printed Name	Process	sing/Issuing Agent	Signature Date			
ALABAMA DEPARTMENT OF PUBLIC HEALTH USE: This application has been reviewed for the individual's right to receive the requested document(s).						
ADPH Employee's Signature	Date		ADPH Rece	ipt Number		

Authors: Jean Brown; William Sutton.

Statutory Authority: Code of Alabama, section 17-9-30

(2011).

History: New Rule: Filed August 6, 2014.